PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patient and Trademy Coffice, U.S. Department of the Proposed for a collection of information under it discharge up the purpher.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/608,191			ing Date 30/2003	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
П	BASIC FEE	-	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (8)
$\overline{}$	(37 CFR 1.16(a), (b), s SEARCH FEE	or (c))	N/A		N/A		21/4		ł		
뉴	(37 CFR 1.16(k), (i), (i)		N/A N/A	_	N/A N/A		N/A N/A		ł	N/A N/A	
	(37 CFR 1.16(o), (p), (FAL CLAIMS		minus 20 =		N/A		X \$ =		OR	x s =	
IND	CFR 1.16(i)) EPENDENT CLAIM	s	minus 20 = *				x s =		OK	x s =	
(37	CFR 1.16(h))	If the	If the specification and dra		rawings exceed 100				ı	- ·	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	on size fee due for each n thereof. See CFR 1.16(s).							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL	
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								L ENTITY	OR		ER THAN
AMENDMENT		CLAIMS	HIGHE		T	1 I				r	
	12/19/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	· 22	Minus	 26	= 0	1	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	• 4	Minus	 3	= 1	1	x \$ =		OR	X \$220=	220
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	220
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.1601)		Minus		=	1	x \$ =		OR	x s =	
	Independent (37 CFR 1,16(h))	*	Minus	***]	x \$ =		OR	x s =	
	Application Size Fee (37 CFR 1.16(s))]			1		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))]			OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in life (and by the USETO to concess) an implication. Confidentially is governed by 85 USE of 22 and 37 CER 1.4. If this collection is estimated to the life 2 minutes to complete in exident gradients, preparing, and submitting the completed application form to the USETO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form double be sent to the Child information Officer. U.S. Patents and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrias, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O., Box 1450, Havandrias, VA 22313-1450, DR NOT SEND FEES OR COMPLETED FORMS TO THIS